



## Employer Declaration for Ignition Interlock Exemption

If you are required to have an ignition interlock device installed in all vehicles you drive and your employer requires you to drive a vehicle without an interlock device during working hours that is owned, leased, rented, or the temporary responsibility of your employer, you must:

- complete the employee section of this form
- have your employer complete and sign the employer section
- carry a copy when driving for your employer
- send a copy of this completed form to:

Restricted License  
**Department of Licensing**  
 PO Box 9030  
 Olympia, WA 98507  
 Fax: (360) 570-7824

**You may only drive the vehicle(s) during working hours.** Employer vehicles assigned exclusively to you that are used solely for commuting to and from employment are not eligible for an exemption.

### Employee

<b>PRINT OR TYPE</b> —Name of applicant ( <i>Last, First, Middle initial</i> )		
Washington driver license number	Date of birth	(Area code) Daytime telephone number

### Employer

Name of employer/representative name	Company (Area code) Telephone number	
Company name	UBI number	
Company street address		
City	State	ZIP code

**This employee is required to operate a vehicle during working hours that is owned, leased, rented, or in the temporary care of this company.**

*I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

	<b>X</b>	
Date and place signed		Employer signature